

CLAIMS ONLY							Application Number <div style="font-size: 1.2em; font-family: cursive;">16706269</div>		Filing Date			
							Applicant(s)					
							* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1			1				51					
2							52					
3							53					
4							54					
5							55					
6							56					
7							57					
8							58					
9							59					
10							60					
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16							66					
17							67					
18							68					
19			1				69					
20							70					
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22							72					
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24							74					
25			1				75					
26			1	1			76					
27			1				77					
28				1			78					
29							79					
30				1			80					
31							81					
32							82					
33							83					
34							84					
35							85					
36							86					

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
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47						
48						
49						
50						
Total Indep			14			
Total Depend			26			
Total Claims			30			

	* AFTER THIRD AMENDMENT		* AFTER FOURTH AMENDMENT		* AFTER FIFTH AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
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100						
Total Indep						
Total Depend						
Total Claims						